New Zealand House of Representatives
Te Whare Māngai o Aotearoa

Petitions Committee
Komiti Whiriwhiri Take Petihana

54th Parliament
September 2026

Petition of William Rea on behalf of Modernise Our Drugs Act (MODA): Modernise New Zealand's Drug Laws

Petition of Gary Chiles: Repeal and replace the Misuse of Drugs Act 1975

Presented to the House of Representatives
by Greg O'Connor, Chairperson

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Petitions of William Rea and Gary Chiles

Recommendation

The Petitions Committee has considered the petition of William Rea on behalf of Modernise Our Drugs Act (MODA)—Modernise New Zealand's Drug Laws—and the petition of Gary Chiles—Repeal and replace the Misuse of Drugs Act 1975—and recommends that the House take note of its report.

Requests for a review of the Misuse of Drugs Act

The petition of William Rea on behalf of Modernise Our Drugs Act was signed by one person. It was presented to the House by Kahurangi Carter on 11 March 2026, and requests:

> That the House of Representatives urge the Minister for Regulation to review the Misuse of Drugs Act 1975 and associated legislation, including the Psychoactive Substances Act 2013, to modernise New Zealand's drug laws; and note that 1,031 people have signed a similar petition.

The petition of Gary Chiles was signed by 152 people. It was presented to the House by Kahurangi Carter on 1 April 2026, and requests:

> That the House of Representatives repeal and replace the Misuse of Drugs Act 1975 with health-focused harm minimisation legislation as recommended by the 2011 Law Commission review report.

Comments from William Rea

Mr Rea says in his petition that he is not arguing for the legalisation or decriminalisation of drugs, nor the reclassification of substances; he says these are questions for a review, which he considers well overdue. He gives five reasons why the Misuse of Drugs Act needs a statutory review, which he believes should be carried out by the Minister for Regulation. We discuss his reasons below.

The Act is over 50 years old

Mr Rea notes that the policy work for the Act was carried out in 1970 and 1973. It was set out in two Board of Health reports, which described drug misuse in New Zealand as affecting a small segment of the population.[1] Mr Rea told us that those drafting the Act could not anticipate the drugs that are available today, which include methamphetamine, MDMA, cocaine, fentanyl analogues, synthetic cannabinoids, potentially fatal nitazenes, and rapidly changing psychoactive substances. Mr Rea said that the 50-year-old Act cannot "reasonably be expected to track, classify, or respond to these changes adequately without review".

[1] National Library, First report: Board of Health Committee on Drug Dependency and Drug Abuse in New Zealand, 1970, and United Nations Library, Final report: Drug dependency and drug use in New Zealand, 1973.

Further, he notes, neither report included any substantial engagement with Māori or Pacific communities, which means that the Act was designed without consultation with those it has since disproportionately affected.

Recommendations from independent reviews have gone unimplemented

Mr Rea notes that the Law Commission's report on its 2011 review of the Act recommended replacing the Act with a new Act, which should be administered by the Ministry of Health.[2] The report said that the Misuse of Drugs Act "fails to respond appropriately to the health and addiction issues which frequently underpin drug use". He said that that recommendation, and others, regarding offence and penalty structure, mandatory cautioning, and moving the regulation of medicines into the Medicines Act, were not implemented. One recommendation was partially implemented: the Psychoactive Substances Act 2013 was introduced to deal with "legal highs". It requires manufacturers to prove a product is "low risk" before it can be legally sold. However, the broader replacement of the 1975 Act was not pursued.

Mr Rea also noted that the 2018 *Government Inquiry into Mental Health and Addiction, He Ara Oranga*, called for a bold, health-oriented approach to the harmful use of alcohol and other drugs.[3] The approach would include decoupling responses from the criminal justice system and strengthening community-based services. Mr Rea said that these recommendations were only partly implemented.

Amendments since the Law Commission report have not helped

Mr Rea argues that neither the Psychoactive Substances Act nor post-2011 amendments to the Misuse of Drugs Act have delivered their intentions. We note that the Ministry of Health's 2018 statutory review of the Psychoactive Substances Act concluded that it had failed to meet its primary objectives of protecting the health of and minimising harm to people who use psychoactive substances.[4]

The Misuse of Drugs Amendment Act 2019 provides that prosecutions for personal possession or use should not be brought unless in the public interest. Another provision directs Police to consider whether a health-centred or therapeutic approach would be more beneficial than the criminal justice system. A 2021 post-implementation review of the Amendment Act by the Ministry of Health found that while drug-related prosecutions had fallen since 2019, there was "insufficient data to conclude" that the decrease was due to the health-based amendment.[5] Mr Rea said this demonstrates that a "single statutory tweak" does not produce structural change.

The current framework produces measurable, documented harms

Mr Rea provided evidence from the Ministry of Justice and Statistics New Zealand that shows that 2025's drug possession or personal-use charges were the highest in the last decade and accounted for 65 percent of all drug convictions. He said this demonstrates that

2 Law Commission, Controlling and Regulating Drugs: A Review of the Misuse of Drugs Act 1975, April 2011.

3 He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction, 4 December 2018.

4 Ministry of Health, Review of the Psychoactive Substances Act 2013, 14 January 2019.

5 Ministry of Health, Misuse of Drugs Amendment Act 2019 Post-Implementation Review, 5 November 2021.

despite the 2019 health-based amendment, prosecutions for personal possession and use are increasing.

Further, Mr Rea told us that according to Department of Corrections data, Māori, who comprise 17.5 percent of the population, are overrepresented across drug-offence categories and make up approximately 53 percent of the prison population. Mr Rea said this shows that the Act produces "racially disproportionate outcomes".

Mr Rea quoted from the New Zealand Drug Foundation Report, *Drug Overdoses in Aotearoa 2025*. The report records that between 2016 and 2024, an average of almost three people died per week from drug overdoses. However, the report also noted that there is currently no national standard for tracking overdose numbers and no national body tasked with counting them. Mr Rea said this lack should be considered in the review.

Mr Rea said that the *New Zealand Illicit Drug Harm Index 2023*, produced by the National Drug Intelligence Bureau, estimated the total harm from illicit drug use in 2023 at $1.9 billion. The total included almost $1.1 billion in community harm.

Public and professional sentiment has moved

Mr Rea said that the 2025 study, *New Zealand's Choice: Funding Our Drug Policy* found that 46 percent of respondents viewed drugs as primarily a health issue, but in small-scale workshops, 90 percent agreed that drugs are a health issue. Mr Rea said the finding suggests that when New Zealanders are given the evidence, a clear majority reach a health-first view.

Mr Rea told us that various independent public health bodies also support a health-first approach. He said they include the Public Health Communication Centre, the Harm Reduction Coalition Aotearoa, the Royal Australasian College of Physicians, and the New Zealand Drug Foundation.

Comments from Gary Chiles

Mr Chiles said he welcomes the Ministry of Health's intended review of the Misuse of Drugs Act, discussed below. He recommends harm minimisation as the guiding principle for change. Mr Chiles wishes to see:

- the repeal and replacement of the Misuse of Drugs Act
- the prioritisation of harm reduction and harm minimisation for all future drug legislation
- the prioritisation of New Zealanders' health and welfare ahead of profits or punishment.

New Zealand's history of drug use

Mr Chiles said that over many centuries, people have used substances to alter their consciousness, regardless of whether they are prohibited. He acknowledged that sometimes this caused problems but said that the Misuse of Drugs Act magnifies substance harm. He is seeking a regulated market where people could seek assistance if they have problems with drugs. He gave regulated production and the distribution of currently prohibited substances as examples of such a market.

Mr Chiles described the history of drug use in New Zealand since the Misuse of Drugs Act. This ranged from accidental heroin overdoses due to the inconsistent quality and potency of the black-market supply chain, to the 1980s regulations on amphetamine sulphate-based pharmaceutical medicines, which resulted in the black market delivering a poor substitute. Mr Chiles said that in response to subsequent demands for a purer form of amphetamines, the black market delivered crystal methamphetamine, or P. Similarly, the prohibition of MDMA created a market for substitute substances that were more problematic than MDMA.

Mr Chiles told us that throughout the 1990s, the black market imported compounds to substitute for LSD and psilocybin that were more harmful than those substances. “Many people were unaware they had consumed a substitute substance until it was too late.”

In the 2000s, smart pills and synthetic cannabis attempted to bypass the Act. Mr Chiles said the Psychoactive Substances Act initially made these substances legal, and later added them to the prohibited list, but “did nothing to eliminate these substances or deal with any harm suffered”. Mr Chiles told us that a legal supply of cannabis would have prevented those substances from entering the market. However, despite the legalisation of medical cannabis, many who use cannabis remain customers of the black market due to unaffordability.

Mr Chiles argued that the Misuse of Drugs Act has failed to reduce substance use or the availability of substances. He said it failed to protect society from the black market that it created and generated huge resources for the operators of global trafficking networks, who outspend law enforcement agencies. He told us that most people using prohibited substances need no intervention to control their substance use. However, for those who do require help, “the least useful solution…is criminalisation and incarceration”.

Comments from the Ministry of Health

The ministry described its 2026–2029 action plan to prevent and reduce substance harm.[6] It said that one of the plan’s actions, scheduled for 2028–2029, is to review and assess whether the relevant legislation is “fit for purpose”, including the Misuse of Drugs Act.

The ministry noted that, because the regulation of controlled drugs overlaps with that of medicines, some substances are currently regulated under both the Misuse of Drugs Act and the Medicines Act 1981. In 2024, Cabinet agreed to repeal and replace the Medicines Act with a new Medical Products Bill. Cabinet agreed in April 2026 that the therapeutic use of controlled drugs will be regulated under the new bill rather than the Misuse of Drugs Act. The ministry said the Medical Products Bill could be introduced to Parliament in 2027, subject to Cabinet agreement.

The ministry noted the concerns of the petitioners and others that the Misuse of Drugs Act does not align with a health-based response to drug-related harm. It said that any move to repeal or replace the bill should be preceded by an “extensive consultation and policy design process” that would include the views of community and health practitioners.

6 Ministry of Health, Action Plan to Prevent and Reduce Substance Harm 2026–2029.

Comments from the Ministry of Justice

The ministry noted that the Law Commission's 2011 review of the Misuse of Drugs Act resulted in the establishment of a pilot drug court in Auckland and Waitākere. Te Whare Whakapiki Wairua | the Alcohol and Other Drug Treatment (AODT) Court was made permanent in 2019. In 2021, an additional AODT court was established at the Hamilton District Court. The ministry said that the AODT courts defer sentencing while participants work through a programme of intensive monitoring, case management, drug testing, and mentoring. The programme also includes regular court appearances to check on progress.

Like the Ministry of Health, the Ministry of Justice told us that any decision regarding the repeal or replacement of the Act would require extensive consultation.

Comments from the New Zealand Drug Foundation

The New Zealand Drug Foundation said it "strongly encourages" Parliament to treat drug use as a health concern, rather than an area of criminal justice. The foundation supports the intent of the petition of Gary Chiles. It also supports the 2011 Law Commission recommendation that the Misuse of Drugs Act 1975 should be repealed and replaced by a new Act, which should be administered by the Ministry of Health. It agreed with Mr Chiles that the "war on drugs" and the Act have exacerbated, rather than minimised, the harm experienced by drug users.

The Drug Foundation's comments on the petition of William Rea

The foundation said it agreed in principle with the arguments laid out in William Rea's five reasons for a review. However, it considers that the Minister of Health, who administers the Act, rather than the Minister for Regulation, is the most appropriate Minister to undertake its review. It said that "health outcomes for people affected by drug harm should be the central focus".

The foundation acknowledged that Mr Rea's petition did not argue for the decriminalisation or legalisation of any drug. It said there is "robust evidence that the removal of criminal penalties for personal possession and use of drugs" is the best next step to reduce drug harm. Given the evidence emerging from overseas jurisdictions that have undertaken law reform, it said, the careful regulation of certain controlled drugs, such as cannabis, should be considered.

Safer drug laws for New Zealand

The foundation referred us to its report, *Safer drug laws for Aotearoa New Zealand: Evidence to inform regulatory change*.[7] The report states that fatal overdoses rose to a rate of almost three per week in 2024, driven largely by opioids and mixing substances. Criminalisation of drugs has not deterred drug use, with the latest data showing that drug use is increasing and diversifying. Māori are particularly affected, suffering fatal overdoses at twice the rate of non-Māori, and comprising more than half of those imprisoned for drug offences in 2023.

[7] New Zealand Drug Foundation, Safer drug laws for Aotearoa New Zealand: Evidence to inform regulatory change (last updated in 2025).

The report recommends:

- the decriminalisation of drug use
- equitably redirecting resources to health, with dedicated funding for Māori services
- establishing a responsive public health infrastructure focused on harm reduction, such as diversified, accessible drug-checking services, safe consumption sites, and access to safer utensils
- the responsible regulation of less harmful substances
- upholding te Tiriti o Waitangi and protecting taonga, with ringfenced funding for harm reduction and substance use disorder treatment for Māori.

The report says that international evidence shows that decriminalising drugs minimises their harm, and that the careful regulation of drugs like cannabis can benefit society.

Our response to the petition

We thank William Rea and Gary Chiles for bringing their petitions to the House. We acknowledge the harm caused by drugs and that many commentators are calling for a review of the Misuse of Drugs Act. We note that the Health Committee is currently considering the Drug Overdose (Assistance Protection) Legislation Bill, a member's bill. The bill seeks to ensure that those who contact emergency services in the event of a drug overdose are protected from being charged for low-level drug offences under the Misuse of Drugs Act.

We are pleased that the Ministry of Health's action plan for 2026–2029 includes a review and assessment of whether regulatory and legislative settings are fit for purpose, including the Misuse of Drugs Act. We agree with the Ministry of Health and the Ministry of Justice that any forthcoming review should include extensive consultation.

Appendix

Committee procedure

The petition of William Rea was signed by one person on the Parliament website. It was presented to the House by Kahurangi Carter on 11 March 2026 and referred to us that day. We met between 30 April and 17 September 2026 to consider it.

The petition of Gary Chiles was signed by 152 people on the Parliament website. It was presented to the House by Kahurangi Carter on 1 April 2026 and referred to us that day. We met between 26 May and 17 September 2026 to consider it.

We received written submissions from both petitioners, the Ministry of Health, the Ministry of Justice, and the New Zealand Drug Foundation. We heard oral evidence from Mr Chiles.

Committee members

Greg O'Connor (Chairperson)
Hon Andrew Bayly (from 1 July 2026)
Greg Fleming
Paolo Garcia (until 1 July 2026)
Celia Wade-Brown.

Scott Willis replaced Celia Wade-Brown for some of our work on this petition.

Related resources

The documents we received as evidence in relation to this petition are available on the Parliament website.

A recording of our hearing with Mr Chiles, starting at 46 minutes and 20 seconds, can be accessed online on the Parliament website.